

BrachyBytes



Less Toxicity. More Patients.
Now *That's* SAVI.



New Standard of Care Offers Lower Toxicity, Shorter Treatment Times and Improved Cosmetic Outcomes for Women with Early Stage Breast Cancer

The American Society for Radiation Oncology (ASTRO) announced an update to its Evidence-Based Consensus Statement for the use of Accelerated Partial Breast Irradiation (APBI) brachytherapy to include younger patients and those with low-risk ductal carcinoma in situ (DCIS)

ASTRO has updated its APBI Consensus Statement to reflect data from three large-scale randomized trials evaluating APBI vs. WBI. The data from these trials were sufficiently robust that committee voted unanimously to change the guidelines, expanding the group of patients for whom APBI brachytherapy is suitable, which now include patients ≥ 50 years of age (previous guidance included patients ≥ 60 years of age). Patients aged 40-49 years of age who meet all other elements of

suitability were placed in the cautionary group.

Cianna Medical has partnered with Elekta to communicate the changes. Both companies are committed to improving cancer care through developing innovative medical technologies and educating women about their options. Key Opinion Leaders voiced their support of the ASTRO's APBI guidelines consensus statement update.

New ASTRO Consensus Statement for APBI

Selected Factors	ASTRO 2009	ASTRO 2016
Age	≥ 60 years	≥ 50 years
T-size	≤ 2 cm	≤ 2 cm
Histology	Invasive	Invasive/ DCIS
Margins	Negative by ≥ 2 mm	Negative by ≥ 2 mm
ER	Positive	Positive

Physician Perspectives



Frank A. Vicini, MD, FACP

Chief Academic Officer
Michigan Healthcare Professionals
21st Century Oncology

“When the original ASTRO consensus statement was issued there was very little actual data on breast brachytherapy to deliver APBI. These guidelines have been updated based upon Phase III trial data, and results from more mature APBI trials. I think we should congratulate ASTRO for updating the guidelines, making them more applicable to the actual results obtained using APBI. I believe that 20-30% more patients will be suitable for APBI simply by reducing the age criteria and including patients with DCIS.”



Atif J. Khan, MD

Director of Brachytherapy Services
Rutgers Cancer Institute
New Brunswick, NJ

“Evidence-based guidelines, such as those issued by ASTRO, have the potential to fundamentally alter clinical practice. These important changes to ASTRO’s guidelines were based on a systematic review of 45 published clinical studies, resulting in a consensus decision to lower the recommended age group for APBI candidates from 60 to 50, significantly expanding the eligible patient population. Several recent clinical studies, including well-designed randomized trials directly comparing APBI to WBI, demonstrate that APBI brachytherapy offers potential advantages over WBI including a shorter course of treatment and decreased radiation while maintaining similarly low rates of cancer recurrence. We anticipate that ASTRO’s recommendations will drive significant changes in how clinicians approach early stage breast cancer treatment.”



Chirag S. Shah, MD

Director of Clinical Research,
Department of Radiation Oncology
Cleveland Clinic
Cleveland, OH

“The updated ASTRO partial breast irradiation consensus guidelines have revealed several significant changes for clinicians. First of all, partial breast irradiation can be offered to patients age 50 and over, changed from 60 and over. Additionally, low-risk DCIS patients can also be treated with partial breast, off-protocol. These changes represent a significant change in treatment options for patients, allowing more patients the ability to complete radiation in one week or less.”



Julie A. Margenthaler, MD, FACS

Professor, Division of General Surgery
Washington University School of Medicine
St. Louis, MO

“APBI brachytherapy is an attractive treatment option for many women with early stage breast cancer. It offers several advantages over WBI, while maintaining similar clinical outcomes, including the possibility of less radiation exposure to critical organs such as the heart, and improved cosmetic outcomes. With the wide body of evidence supporting the safety and efficacy of APBI for women with early stage breast cancer and the guidelines update from ASTRO, we should soon see more widespread adoption of this clinically proven and convenient approach that targets only the tissue at risk and is kinder to patients. Indeed, treating these women with whole breast radiation may represent overtreatment.”



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